

## PART B - FEE(S) TRANSMITTAL

OIP  
DEC 29 2006

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**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent advance order and notification of maintenance fees will be mailed to the current correspondence address as indicated. All fees corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for fee notification.

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50380 7590 10/05/2006

**GOWAN INTELLECTUAL PROPERTY**  
**1075 NORTH SERVICE ROAD WEST**  
**SUITE 203**  
**OAKVILLE, ON L6M-2G2**  
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Gerald A. Gowan (Depositor's name)  
 (Signature)  
 December 29, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/694,851	10/29/2003	Terrance N. Durdan	2077-41	6267

**TITLE OF INVENTION:** DISPOSABLE CUP LID WITH RECLOSABLE AND RESEALABLE CONDIMENT TAB

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$750 1400	\$300	\$0	\$1000	01/03/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HYLTON, ROBIN ANNETTE	3727	220-234300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.383).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gowan Intellectual Property  
 \_\_\_\_\_  
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3. ASSIGNER NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Amhil Enterprises

Mississauga, Ontario, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2).

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Authorized Signature \_\_\_\_\_

Date December 29, 2006

Typed or printed name Gerald A. Gowan

Registration No. 37041

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# FACSIMILE MESSAGE

FROM THE OFFICE OF:

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**Patents, Trade Marks & Designs**

Your Ref: Appln No. 10/694851

Date: December 29, 2006

Our Ref: 2077-41

FROM: Gerald A. Gowan

TO: Company: USPTO

Attention: Examiner Robin Hylton - Group Art Unit 3727

Fax #: 571-273-2885

# OF PGS INCL COVER: 5

**COMMENTS:**

Re: **US Patent Application No. 10/694851 - Inventor: DURDON**  
**"Disposable Cup Lid with Reclosable and Resealable Condiment Tab"**

**Includes:**

Fax cover Sheet - 1 page  
Transmittal Form - 1 page  
Part B - Fee Transmittal - 1 page  
Credit Card Payment Form - 1 page  
Certificate of Transmission - 1 page

Total: 5 pages

**Certificate of Transmission**

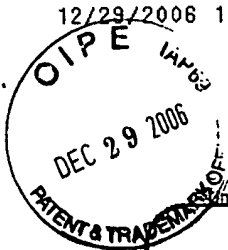
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Name: Gerald A. Gowan  
Regn. No. 37041

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Please take note that the enclosed documentation is intended for receipt only by the above-named addressee. If you are not that person, please call us, and please return this page and all the pages that follow by mail to the address noted below.

1075 North Service Road West, Suite 203  
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TELEPHONE NO: (905) 827-5000 FACSIMILE NO: (905) 827-5087



PTO/SB/21 (09-08)  
Approved for use through 03/31/2007. OMB 0851-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/594951
	Filing Date	10/29/2006
	First Named Inventor	DURDON
	Art Unit	3727
	Examiner Name	HYLTON, Robin Annelle
Total Number of Pages in This Submission		Attorney Docket Number 2077-41

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Credit Card Payment Form - Certificate of Transmission
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Gowan Intellectual Property		
Signature			
Printed name	Gerald A. Gowan		
Date	December 29, 2006	Reg. No.	37041

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Signature			
Typed or printed name	Gerald A. Gowan	Date	December 29, 2006

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/97 (09-08)

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Gerald A. Gowan

Typed or printed name of person signing Certificate

37041

Registration Number, if applicable

905-827-5000

Telephone Number

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Docket No.: 2077-41

- Fax Cover Sheet - 1 page
- Transmittal Form - 1 page
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